

**King County Facilities Maintenance Division
CUSTODIAL AND CLEANING SERVICES**

Tenant Representative Customer Survey

This survey is being used to ensure exceptional service. Please take a few minutes to provide your opinions about services you receive from the Facilities Management Division.

1. In what building do you work?

☐ Courthouse

☐ Administration Building

☐ Other - Please specify _____

2. For what floor(s) are you responsible? _____

3. What is your Department/Division? _____

Thinking about the last several months...

4. Do you believe the (proposed or current) service level agreement (SLA) with FMD has been met? Please use a five-point scale where 1 means "Unsatisfactory" and 5 means "Very Good."

<u>Unsatisfactory</u>	<u>Needs Improvement</u>	<u>Meets Expectations</u>	<u>Exceeds Expectations</u>	<u>Very Good</u>
1	2	3	4	5
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Comments:

5. How do you rate the **overall quality of the custodial and cleaning services** provided in your work area by the FMD? Please use a five-point scale where 1 means "Unsatisfactory" and 5 means "Very Good."

<u>Unsatisfactory</u>	<u>Needs Improvement</u>	<u>Meets Expectations</u>	<u>Exceeds Expectations</u>	<u>Very Good</u>
1	2	3	4	5
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Comments:

6. How do you rate the **quality of customer service** provided by FMD custodial staff in each of the following areas? Please use a five-point scale where 1 means “Unsatisfactory” and 5 means “Very Good.”

	<u>Unsatisfactory</u>	<u>Needs Improvement</u>	<u>Meets Expectations</u>	<u>Exceeds Expectations</u>	<u>Very Good</u>
	1	2	3	4	5
Courteous	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Professional	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Responsive	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Comments:

7. For each area, please rate the **quality of daily and weekly custodial services**. Please use a five-point scale where 1 means “Unsatisfactory” and 5 means “Very Good.”

	<u>Unsatisfactory</u>	<u>Needs Improvement</u>	<u>Meets Expectations</u>	<u>Exceeds Expectations</u>	<u>Very Good</u>
	1	2	3	4	5
Public Areas (Lobbies, Halls, Elevators, Stairwells)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Restrooms	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Office Spaces	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Meeting & Conference Rooms	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Kitchen & Break areas	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Comments:

8. For each *specialized area (if applicable)*, please rate the **quality of daily and weekly custodial services.** Please use a five-point scale where 1 means “Unsatisfactory” and 5 means “Very Good.”

	<u>Unsatisfactory</u>	<u>Needs Improvement</u>	<u>Meets Expectations</u>	<u>Exceeds Expectations</u>	<u>Very Good</u>
	1	2	3	4	5
Holding cells (precincts)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Clinics	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Exam rooms	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Library	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Judge's Chambers	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Court Rooms	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Jury Rooms	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Shower/Locker Rooms	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Copy Room	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Comments:

9. Is there anything else you would like to tell us about the quality of the services received or your satisfaction regarding services you receive from the Facilities Management Division?

Optional: Please tell us your name if you would like a follow-up call: _____

Thank you very much for your time and input.

**King County Facilities Maintenance Division
PERIODIC CUSTODIAL SERVICES: WINDOW WASHING & FLOOR CARE**

Tenant Representative Customer Survey

This survey is being used to ensure exceptional service. Please take a few minutes to provide your opinions about services you receive from the Facilities Management Division.

1. In what building do you work?
☐ Courthouse
☐ Administration Building
☐ Other – Please specify _____
2. For what floor(s) are you responsible? _____
3. What is your Department/Division? _____

Thinking about the last time window washing or floor care was done in your building...

4. For each area, please rate the **overall quality of periodic custodial service**. Please use a five-point scale where 1 means “Unsatisfactory” and 5 means “Very Good.”

	<u>Unsatisfactory</u>	<u>Needs Improvement</u>	<u>Meets Expectations</u>	<u>Exceeds Expectations</u>	<u>Very Good</u>
	1	2	3	4	5
Window washing	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Floor care (polishing/buffing)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Comments:

5. How do you rate the **quality of customer service** provided by FMD custodial staff in each of the following areas? Please use a five-point scale where 1 means “Unsatisfactory” and 5 means “Very Good.”

	<u>Unsatisfactory</u>	<u>Needs Improvement</u>	<u>Meets Expectations</u>	<u>Exceeds Expectations</u>	<u>Very Good</u>
	1	2	3	4	5
Courteous	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Professional	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Responsive	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Comments:

6. How do you rate the **quality of periodic custodial services** provided by FMD custodial staff in each of the following areas? Please use a five-point scale where 1 means “Unsatisfactory” and 5 means “Very Good.”

	<u>Unsatisfactory</u>	<u>Needs Improvement</u>	<u>Meets Expectations</u>	<u>Exceeds Expectations</u>	<u>Very Good</u>
	1	2	3	4	5
Window Washing					
Windows free from spots and streaks	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
All accessible windows were cleaned	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Exposed window sills/ledges wiped clean	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Arrived as scheduled, or notified if schedule changed	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Floor Care					
Hard surfaced floors are noticeably shiny/clean	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Floor finish is even and free from debris/stains	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Carpets are noticeably cleaner	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
All furniture was put back in place	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Arrived as scheduled, or notified if schedule changed	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Comments:

7. Is there anything else you would like to tell us about the quality of the services received or your satisfaction regarding services you receive from the Facilities Management Division?

Optional: Please tell us your name if you would like a follow-up call: _____

Thank you very much for your time and input.

Service Employees International Union, Local 925 - Department of Executive Services - Facilities Management Division

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**King County Facilities Maintenance Division
MAINTENANCE & MOVING SERVICES**

Tenant Representative Customer Survey

This survey is being used to ensure exceptional service. Please take a few minutes to provide your opinions about services you receive from the Facilities Management Division.

1. In what building do you work?
☐ Courthouse
☐ Administration Building
☐ Other – Please specify _____
2. For what floor(s) are you responsible? _____
3. What is your Department/Division? _____

Thinking about the last time maintenance or moving was done in your building...

4. How do you rate the **overall quality of maintenance services** provided by the FMD?
Please use a five-point scale where 1 means “Unsatisfactory” and 5 means “Very Good.”

<u>Unsatisfactory</u>	<u>Needs Improvement</u>	<u>Meets Expectations</u>	<u>Exceeds Expectations</u>	<u>Very Good</u>
1	2	3	4	5
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Comments:

5. How do you rate the **quality of customer service** provided by **FMD maintenance staff** in each of the following areas? Please use a five-point scale where 1 means “Unsatisfactory” and 5 means “Very Good.”

	<u>Unsatisfactory</u>	<u>Needs Improvement</u>	<u>Meets Expectations</u>	<u>Exceeds Expectations</u>	<u>Very Good</u>
	1	2	3	4	5
Courteous	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Professional	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Responsive	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Comments:

6. How do you rate the **quality of maintenance services** provided by FMD maintenance staff in each of the following areas? Please use a five-point scale where 1 means “Unsatisfactory” and 5 means “Very Good.”

	<u>Unsatisfactory</u>	<u>Needs Improvement</u>	<u>Meets Expectations</u>	<u>Exceeds Expectations</u>	<u>Very Good</u>
	1	2	3	4	5
Completed all work as requested	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Work, once started, is completed promptly	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Work area was left clean					
Arrived as scheduled, or notified if schedule changed	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Comments:

7. Is there anything else you would like to tell us about the quality of the services received or your satisfaction regarding services you receive from the Facilities Management Division?

Optional: Please tell us your name if you would like a follow-up call: _____

Thank you very much for your time and input.

**King County Facilities Maintenance Division
HAZARDOUS MATERIALS MANAGEMENT SERVICES**

Customer Survey

This survey is being used to ensure exceptional service. Please take a few minutes to provide your opinions about services you receive from the Facilities Management Division.

1. In what building do you work?
☐ Courthouse
☐ Administration Building
☐ Other – Please specify _____
2. For what floor(s) are you responsible? _____
3. What is your Department/Division? _____
4. Are you a:
Project manager ☐
Building tenant representative ☐
Building superintendent ☐

Thinking about the last time the hazardous material management group did work in your building...

5. How do you rate the **quality of hazardous materials management services** provided by the FMD? Please use a five-point scale where 1 means “Unsatisfactory” and 5 means “Very Good.”

<u>Unsatisfactory</u>	<u>Needs Improvement</u>	<u>Meets Expectations</u>	<u>Exceeds Expectations</u>	<u>Very Good</u>
1	2	3	4	5
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Comments:

6. How do you rate the **quality of customer service** provided by **FMD hazardous materials management staff** in each of the following areas? Please use a five-point scale where 1 means “Unsatisfactory” and 5 means “Very Good.”

	<u>Unsatisfactory</u>	<u>Needs Improvement</u>	<u>Meets Expectations</u>	<u>Exceeds Expectations</u>	<u>Very Good</u>
	1	2	3	4	5
Courteous	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Professional	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Responsive	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Comments:

7. How do you rate the **quality of hazardous materials management services** provided by FMD custodial staff in each of the following areas? Please use a five-point scale where 1 means "Unsatisfactory" and 5 means "Very Good."

	<u>Unsatisfactory</u>	<u>Needs Improvement</u>	<u>Meets Expectations</u>	<u>Exceeds Expectations</u>	<u>Very Good</u>
	1	2	3	4	5
Completed all work as scheduled	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Work area was left clean	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Safety procedures were followed	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Arrived as scheduled, or notified if schedule changed	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Comments:

8. Is there anything else you would like to tell us about the quality of the services received or your satisfaction regarding services you receive from the Facilities Management Division?

Optional: Please tell us your name if you would like a follow-up call: _____

Thank you very much for your time and input.